

**FEE TRANSMITTAL**

Electronic Version v08

Stylesheet Version v08.0

<b>Title of Invention</b>	<b>MOBILITY ASSISTANCE DEVICE</b>																																
Application Number : Date : First Named Applicant: Susan Kirkwood Attorney Docket Number: SK1001R																																	
<b>TOTAL FEE AUTHORIZED \$ 473</b> Patent fees are subject to annual revisions on or about October 1st of each year.																																	
Filing as small entity  <b>BASIC FILING FEE</b> <table border="1"><thead><tr><th>Fee Description</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Utility Filing Fee</td><td>2001</td><td>385</td><td>385</td></tr><tr><td colspan="4">Subtotal For Basic Filing Fees: \$ 385</td></tr></tbody></table> <b>EXTRA CLAIM FEES</b> <table border="1"><thead><tr><th>Fee Description</th><th>Extra Claim</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Total Claims : 25</td><td>5</td><td>2202</td><td>9</td><td>45</td></tr><tr><td>Independent Claims : 4</td><td>1</td><td>2201</td><td>43</td><td>43</td></tr><tr><td colspan="5">Subtotal For Extra Claims Fees: \$ 88</td></tr></tbody></table>		Fee Description	Fee Code	Amount \$	Fee Paid \$	Utility Filing Fee	2001	385	385	Subtotal For Basic Filing Fees: \$ 385				Fee Description	Extra Claim	Fee Code	Amount \$	Fee Paid \$	Total Claims : 25	5	2202	9	45	Independent Claims : 4	1	2201	43	43	Subtotal For Extra Claims Fees: \$ 88				
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<b>AUTHORIZED BILLING INFORMATION</b> The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:  Deposit account number: 100637 Access Code ***** Deposit name: Walker & Jocke Deposit authorized name: Nancy L. Reeves Signature: /nlr/ Date (YYYYMMDD): 2004-09-28 Charge Assignment Fees Required Under 37 C.F.R. Section 1.21 (h). Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.																																	

Adjustment date: 11/08/2004 BHARTEW 10711597  
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03 FC:2201 43.00 CR